NOV 6 - 2007

CERTIFICATE OF FAX TRANSMISSION

Transmission Date	e: 06 November 20 0	7 Do	ocket: 1120-005
Transmission #: 1	of Total Transmiss	sions: 2	
Pages in this Trans	smission: 54 of Total	Pages T	ransmitted: 116
transmissions as described	llowing correspondence is being fall above, to the attention of the Direction that the following facsimile numbers:	ctor of the U	JS Patent and Trademark
Request For Co	ntinued Examination (RCE) Trans	mittal (PTO	/SB/30) (1 sheet)
Fee Transmittal	Form (PTO/SB/17) (1 sheet)		
Credit Card Pay	ment Form (PTO-2038) (1 sheet)		
Preliminary An	endment (105 sheets)		
Declaration Un	der 37 C.F.R. § 1.132 (6 sheets)		
Second Certific	ation for 2nd Transmission (1 she	et)	
Application Number	09/843,289	Art Unit:	2616
Confirmation No.: Filing Date:	7918 24 April 2001	Examiner: Inventor:	-
Document Submission D	ate: 06 November 2007	Docket:	2005P12928US (1120-005)
06 Nov 2007	Kelly B. Smoker		Celly B. Smoker
Date	Name of Certifier		Signature of Certifier

Pg 3/54 11/06/07 8:40 am

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Under the Panaryork Radiustion Act of 1995 inn necessity are required to re Effective on 12/08/2004.			esonari to a collection of information unless it displays a valid GMR control number Complete if Known						
Fees pursuant to the Consolidated Appropriations Act. 2005:(H.R. 4818).			Application Numi	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
FEE TRANSMITTAL			Filing Date		24 April 2001				
For FY 2005		First Named Inve		Atwater, Antonio					
		Examiner Name	11171	Nguyen, Phuongchau Ba					
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		2616				
TOTAL AMOUNT OF PAYMENT (\$) 810:00				2005P12928US (1120-005)					
TOTAL AMOUNT OF PAYMENT (\$) Attorney Clocket No. 2005P12928US (1120-005)									
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify)									
Deposit Account Deposit Account Number: 50-2504 Deposit Account Name: Michael N. Haynes									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
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under 37 CFR 1.18 and 1.17. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
Information and authorization on PTO-2038. FEE CALCULATION									
1. BASIC FILING, SI		XAMINATION FEES							
	FILING F	ees sea	RCH FEES	EXAMINATIO					
Application Type	Pee (\$)	nall Entity Fee (\$)	9mall Entity (\$)		II Entity se (4)	Fees Pai	d (\$)		
Utility	300	150 500		- 12 -	100				
Design	200	100 100	50	130	65 -				
Plant	200	100 300	150	160	80 _				
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Provisional	200	100 0	0	0	0 -				
2. EXCESS CLAIM I	FEES					S	mall Entity		
Fee Description	- £ D-:		ad among dhara (a dh	a animinul muta		<u>Fee (\$)</u> = 50	<u>Fee (\$)</u> 25		
Each claim over 20 o. Each independent cla							100		
Multiple dependent cl		7 1101331105, 011111 11111	pendent examination		angum puram	360	180		
Total Claims	Extra Claims	Fee (8) Fe	Paid (ž)	Multiple Depe					
- 20 or HP HP = highest number of t		x =	<u> </u>	Fee (\$)	<u>Fee Pald (</u> O	<u>(\$)</u>			
indep. Claims	Extra Claims		Pald (S)			_			
-3 or HP :			<u> </u>						
HP = highest number of independent cisims paid for, if greater than 3									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)									
for each additional 30 shorts or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) 0									
Other: Request for Continued Examination (RCE) 810									
SUBMITTED RY									
Signature	milel 7.	Hayne	Registration No.	40,014	Telephona 4	134-972-96	388		
Name (Print/Tyre) Mich			1 Terrori Inst.witeur!		Date 06 No				

From: Kelly B at Michael Haynes PLC

This collection of information is required by 37 CFR 1.136. The information is required to obtain or ratein a benefit; by the public which is to file (and by the USPTO to process) an application. Confidentiallty is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing the burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1480.

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